JENNIFER M. GRANHOLM **GOVERNOR**

DEPARTMENT OF ENERGY, LABOR & ECONOMIC GROWTH STANLEY "SKIP" PRUSS LANSING

DIRECTOR

IMPORTANT INFORMATION REGARDING APPRENTICE REGISTRATIONS

ALL APPRENTICES ARE REQUIRED TO BE REGISTERED IN THE STATE OF MICHIGAN IN ORDER TO DO ELECTRICAL WORK.

- Apprentice registrations applications are required within 30 days of employment.
- Apprentices are required to carry their **ACTIVE** registration with them at all times on the job site. Only hours worked on an active registration will be credited toward the 8,000 hours to take the journeyman's examination.
- Only the master of record qualifying the electrical contractor may sign any documentation regarding apprentice registration applications, renewals and letters of verification.
- It is in the apprentice's best interest to get an original notarized letter verifying hours worked and signed by the master of record prior to or upon terminating employment with the electrical contractor.

Verification letters must meet the following requirements:

- a. Must be on company letterhead.
- b. Master of record for electrical apprentices or signatory fire alarm specialty technician for fire alarm apprentices must sign all applications and other documents and verify all hours. The master of record is the person signatory on the electrical contractor's license. For fire alarm apprentices the person that must sign all documents is the fire alarm specialty technician who is signatory on the fire alarm contractor's license
- c. Must include the master of record's license number.
- d. Starting month/day/year and ending month/day/year of employment.
- e. Total number of hours worked (performing electrical work) not including overtime hours.
- An apprentice must be directly supervised by a master or journeyman electrician on a jobsite at all times.

Providing for Michigan's Safety in the Built Environment

BUREAU OF CONSTRUCTION CODES P.O. BOX 30254 • LANSING, MICHIGAN 48909 Telephone (517) 241-9320 • Fax (517) 241-9308 www.michigan.gov/dleg

• It is the responsibility of the apprentice to notify the Bureau of Construction Codes Electrical Division in **writing** of any address or phone number changes when they occur.

Note: Apprentices using a mailing address with a PO Box \underline{MUST} also provide their residential address.

Application for Electrical Apprentice or Fire Alarm Specialty Apprentice Technician

Michigan Department of Energy, Labor & Economic Growth Bureau of Construction Codes / Electrical Division P.O. Box 30255, Lansing, MI 48909 517-241-9320

www.michigan.gov/bcc Agency Use Only Fee: \$15.00 Authority: 1956 PA 217 DELEG is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon Completion: Mandatory request to individuals with disabilities. Certificate of Registration will not be issued Penalty:

This form is for 1st time apprentice registration only. If you have previously registered call for assistance.

Instructions:

- · Complete and sign application. Type or print in ink.
- The supervising master electrician's signature must be notarized.
- Enclose a check made payable to the State of Michigan.

Mail completed application	and payment to the address listed ab	oove.	
Applicant Information INDICATE WHICH APPRENTICE REGIS	TRATION VOLLARE OFFICINO		
☐ Electrical Apprentice NAME (Last Name, First Name, Middle In		rm Specialty Apprentice T DATE OF BIRTH	
NAME (Last Name, First Name, Middle In	itial)	DATE OF BIRTH	LAST 4 DIGITS OF SOCIAL SECURITY NUMBER*
			XXX-XX-
ADDRESS	CITY		TOWNSHIP
COUNTY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
years, needed to sit for the electrician pursuant to 195 prohibited from engaging in e	journey electrician examination un 6 P.A. 217 and the Electrical Admin electrical work without the direct super of Applicant	der the supervision of histrative Board Gener vision of a licensed elec	ements of 8,000 hours, in not less than 4 a licensed electrical journeyman or master al Rules. I understand as an apprentice I amotrician.
	r revocation of electrical apprentice re		erstand raisincation of any statement is cause
APPLICANT'S SIGNATURE		DATE	
	rmation - Locally licensed contractors mu	ıst provide a copy of currer	nt license with this application
SPONSORING EMPLOYER		CONTRAC	TOR / FIRE ALARM CONTRACTOR LICENSE NUMBER
ADDRESS	CITY	STATE	ZIP CODE
HIRE DATE OF APPLICANT		TELEPHONE NU	MBER (Include Area Code)
Certification and Signature	of Supervising Master Electrician	- Signature must be notariz	red
I certify the information is true and accurate to the best of my knowledge.		Cuba anik - d	d quara before me this day of
SIGNATURE OF SUPERVISING MASTER ELECTRICIAN / FIRE ALARM SPECIALTY TECHNIC		IAN	d sworn before me, this day of, 20,
			c in and forCounty, Michigan.
MASTER / FIRE ALARM SPECIALTY TE	CHNICIAN LICENSE NUMBER	Signature of N	otary Public
		My Commission	on expires:, 20

*This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.